| | | | | | | | Application or Docket Number | | | | | |
|---|--|--|--------------------|---|------------------|---------------|------------------------------|------------------------|----------------|---------------------|------------------------|--|
| | PATENT A | RD | (| <u>)</u> q | 6 | 725 | 360 | | | | | |
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | SMA | | ENTITY | OR | OTHER SMALL | | |
| FC | R . | NUM | NUMBER FILED NUMBE | | EXTRA | RA* | E | FEE | 1 | RATE | FEE | |
| ВА | SIC FEE | | | | | | | 345.00 | OR | | 690.00 | |
| то | TAL CLAIMS | | 9 minus 2 | · | X\$ | | OR | X\$18= | 342 | | | |
| IND | EPENDENT CL | AIMS _ | S minus 3 = | | | X39= | | | OR | X78= | 7 | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | +13 | +130= | | | +260= | 1 | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | тот | AL | | OR OR | TOTAL | 1032 | |
| 8/2/04 (Column 1) (Column 2) (Column 3) | | | | | SMA | SMALL ENTITY | | | OTHER SMALL | | | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMEN | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | ŔAT | E | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | . 39 | Minus | 39 | = | X\$ |) = | | OR | X\$18= | | |
| AME | Independent | 3 | Minus | endent claim | = | X39 |)= | | OR | X78= | | |
| | FIRST PRESE | NIATION OF | MOLITEE DET | -ENDERT COAIM | | +13 |)= | | OR | +260= | | |
| | | | | | | TO ADDIT. | TAL | | OR | TOTAL ADDIT, FEE | | |
| | | , | | | • | | | | | | | |
| AMENDMENT B | | REMAINING AFTER AMENDMEN | | NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RAT | Έ | AŬŬI- TIONAL FEE | | RATE | AŪŪi- TIONAL FEE | |
| | Total | • | Minus | ** | = | X\$ 9 |)= | | OR | X\$18= | | |
| | Independent | <u> -</u> | Minus | *** | = | X39 | = | | OR | X78= | | |
| Н | FIRST PRESE | NIATION OF | MULTIPLE DEF | PENDENT CLAIM | | +130 |)= | | OR | +260= | | |
| | | | | | | TO ADDIT. | TAL | | OR | TOTAL ADDIT, FEE | | |
| | | (Column 1 |) | (Column 2) | (Column 3) | | | | | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENOMEN | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RAT | Ε | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | | Minus | ** | = | · X\$ 9 |)= | | OR | X\$18= | | |
| | Independent | • | Minus | *** | = | X39 | <u>.</u> | | OR | X78= | | |
| Ľ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | - | - | | | | | |
| ١., | f the entire in colum | +130 | | | OR | +260= | | | | | | |
| "If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |
| ' ' | The "Highest Nurr | iber Previously | Paid For (Total or | Independent) is the | e nighest numbe | r tound in th | ө арр | ropnate box | K ILL COI | umn 1. | | |